

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address): 	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA <input type="checkbox"/> 800 SOUTH VICTORIA AVE., VENTURA CA. 93009 <input type="checkbox"/> 3855 - F ALAMO ST., SIMI VALLEY, CA. 93063-2110		<input type="checkbox"/> LIMITED CIVIL
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:		CASE NUMBER:
MOTION FOR PAYMENT OF JUDGMENT BY INSTALLMENTS		Date: _____ Time: _____ Courtroom: _____

NOTICE IS HEREBY GIVEN that on _____, at _____ ☐ a.m. ☐ p.m. or as soon thereafter as the matter may be heard, in Courtroom _____ of the above-captioned court, defendant _____ shall move the court for an order permitting payment of the judgment in the within action to be paid in installments.

This motion is made pursuant to: ☐ California Code of Civil Procedure Section 582.5
☐ California Vehicle Code sections 16379 and 16380.

on the grounds that the defendant ☐ does not have the means to pay the judgment in this action.
☐ is severely restricted in finding employment without the ability to drive.

Facts supporting this motion are set forth in the following declaration.

Judgment debtor requests a payment schedule as follows:

_____ dollars (\$ _____) per month commencing on _____
 and \$ _____ each succeeding month thereafter until the entire \$ _____ judgment amount is paid in full.

Date: _____

 (Signature of Defendant)

 (Type or Print Name)

DECLARATION

I, _____, declare as follows:

1. I am the judgment debtor in this action. I am a resident of the County of _____, State of California.
 I have personal knowledge of the following facts and if called upon to testify, I could and would give competent testimony to the facts stated in this declaration.
2. On or about _____, I was involved in a motor vehicle accident. At the time of the accident I did not have insurance to cover me for liability resulting from the accident.

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☐ Other (describe) _____

3. On or about _____, a judgment was entered against me in this case in the sum of \$ _____ in damages and \$ _____ in costs; and that the total amount of the judgment is \$ _____.

4. I am not able to pay the judgment because _____

5. As a result of the judgment against me in this case:

☐ my driver's license has been suspended. I am unable to work without a driver's license because:

☐ Other (describe) _____

6. In order to ☐ get my driver's license reinstated, I must arrange for a payment schedule which I can reasonably meet.

☐ Other (describe) _____

7. My monthly income is \$ _____. I have _____ persons living in my household whom I support. Proof of my income is attached to this declaration as Exhibit "A". My completed financial statement is attached to this declaration as Exhibit "B". I believe I can make payments of \$ _____ per month commencing on _____.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____, at _____ California.

_____	_____
Type or Print Name	Signature of Defendant